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Enrolment of children aged 6–23 months into the maternal and child and nutrition programme in kotido district, Karamoja region, Uganda: A mixed methods study

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Abstract

Karamoja sub-region scores poorly on key development and health indicators including nutrition. The Maternal and Child Health and Nutrition (MCHN) programme, a stunting prevention programme was therefore introduced in 2005 to curb and reduce stunting levels. Enrolment levels for children aged 6–23 months into the MCHN programme is low and yet factors associated with enrolment levels have not been investigated in Kotido district, Uganda. The study determined the individual, health systems and programme factors associated with the enrolment of children aged 6–23 months into the MCHN programme in Kotido district, Uganda. Experiences about the programme were also explored.

This was a concurrent mixed methods study. Mothers with children aged 6–23 months were selected using a 2-stage cluster sampling method. Quantitative data was collected using interviewer-administered structured questionnaires administered to 326 respondents. Modified Poisson regression analysis was used to determine independent factors associated with the enrolment of children into the programme. All factors with a p-value less than 0.2 at the bivariate level were integrated in the multivariate model and associations were considered significant at $p < 0.05$. Quantitative data were summarised as descriptive statistics. Qualitative data was collected using key informants and focus discussion guides and analysed using thematic analysis.

The proportion of children who were enrolled on the programme was 77%. The mean age of respondents was 29 years. Almost all respondents had no formal education (95.4%). Multivariate analysis showed that waiting time (APR:0.82;95% CI:0.72–0.93), availability of food at health facility (APR:1.12;95%CI:1.03–1.23), staff conduct (APR:0.89;95% CI:0.82–0.96), distance to the Food Distribution Point (APR:0.79;95% CI: 0.68–0.92 and perceived Maternal and Child Health service quality (APR:0.74;95% CI: 0.64–0.86) were significantly associated with enrolment into the programme. The key factors associated with the enrolment of children into the Maternal, child health and nutrition programme included waiting time, availability of food, distance to the food distribution point, perceived quality of maternal and child health services and staff conduct.

There is a need to decentralise the programme to lower health facilities as well as community outreaches so that underserved areas are reached to achieve a greater positive impact on nutrition indicators in the district.

Keywords: Food assistance, Karamoja region, Maternal & child health nutrition, stunting

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